

NO.	8006—P. 1———
Badge # _ Return Date	Annual
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This form should be completed for each communication with a member of the Board of County Commissioners and may be submitted to the front desk at the County Commissioner's Office or the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned. Lobbyists who are registered annually need to complete Section 2 only once. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This teams can be accessed on the County's website at www.co.clark.nv.us/clerk/forms.htm

SECTION 1	
LOBBYIST NAME: Christopher L. Kaempfer	
APPLICATION DATE: COMMUNIC	CATION DATE: 4/29/14
COMMUNICATION ITEMS: HMSHost - General Airport Matters a	
COMMISSIONER(S) CONTACTED: Commissioners Brown, Chris	
SECTION 2	
PERMANENT ADDRESS: on file	
BUSINESS NAME:	
BUSINESS ADDRESS:	
SECTION 3	
PROVIDE THE BUSINESS NAME, FULL NAME, AND COMPERSON OR ENTITY BY WHOM YOU ARE RETAINED, BEHALF YOU ARE APPEARING TODAY:	MPLETE ADDRESS OF EACH EMPLOYED, OR ON WHOSE
NAME/BUSINESS NAME Anthony Alessi HMSHost ADDRESS 6905 Rockledge Drive Bethesda, MD 20817	<u>PHONE</u> 702-694-4185
THAOL OUT	
Octobra (2)	4/30/14
SIGNATURE OF LOBBYIST	DATE

^{*}An amendment to the registration must be filed with the County Clerk, Commission Division, if there is a substantial change or addition with respect to the information contained in the original registration statement.



Badge #	Annual
Return Date	
Renewal Date	
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Lobbyist Registration Statement

_NO. 8005____P. 1____

This form should be completed for each communication with a member of the Board of County Commissioners and may be submitted to the front desk at the County Commissioner's Office or the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned. Lobbyist who are registered annually need to complete Section 2 only once. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be considered on the County's website at www.co.clark.nv.us/clerk/forms.htm

40000	SECTION 1		
LOBBYIST NAME: Christopher	L. Kaempfer		
APPLICATION DATE:	COMMUN	IICATION DATE:	4/28/14
COMMUNICATION ITEMS: HM	ISHost - General Airport Matters	at McCarran Airport	
COMMISSIONER(S) CONTACTED:	Commissioners Weekly and S	Sisolak	
	SECTION 2		
PERMANENT ADDRESS:on fi	le		
BUSINESS NAME:			
BUSINESS ADDRESS:			
	SECTION 3		
PROVIDE THE BUSINESS N PERSON OR ENTITY BY W BEHALF YOU ARE APPEARING	AME, FULL NAME, AND CO HOM YOU ARE RETAINED, TODAY:	MPLETE ADDRESS EMPLOYED, OR C	OF EACH N WHOSE
NAME/BUSINESS NAME	ADDRESS 6905 Rockledge Drive		<u>PHONE</u> 02-694-4185
Anthony Alessi HMSHost	Bethesda, MD 20817		02-034-4103
			
Colonie C	}	4/	29/14
SIGNATURE OF LOBBYIST		DATE	

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NO.	8004	Ρ.	1



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Badge #	Anoual
Return Date	
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This form should be completed for each communication with a member of the Board of County Commissioners and may be submitted to the front desk at the County Commissioner's Office of the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned Lobbyists who are registered annually need to complete Section 2 only once. Completed forms Emay also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be accessed on the County's website at www.co.clark.nv.us/clerk/forms.htm

SECTION 1	
LOBBYIST NAME: Christopher L. Kaempfer	
APPLICATION DATE: COMMUNICATION	ON DATE: 3/26/14
COMMUNICATION ITEMS: MME Establishments/CWNevada, LLC Commissioners Collins, Chris Giun COMMISSIONER(S) CONTACTED: and Scow	chigliani, Weekly, Brown, Brager
COMMISSIONER(S) CONTACTED. and Boow	
SECTION 2	
PERMANENT ADDRESS: on file	
BUSINESS NAME:	
BUSINESS ADDRESS:	
SECTION 3	
PROVIDE THE BUSINESS NAME, FULL NAME, AND COMPLE PERSON OR ENTITY BY WHOM YOU ARE RETAINED, EMP BEHALF YOU ARE APPEARING TODAY:	TE ADDRESS OF EACH LOYED, OR ON WHOSE
NAME/BUSINESS NAME CWNevada, LLC ADDRESS 611 South 6th Street, 2th Floor Las Vegas, NV 89101	<u>PHONE</u> (702) 304-0123
SIGNATURE OF LOBBYIST	3/31/14 DATE

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Badge # _____Annual

Return Date

Renew Date ______

This form should be completed for each communication with a member of the Board of County Commissioners and may be submitted to the front desk at the County Commissioner's Office by the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be required. Lobbyists who are registered annually need to complete Section 2 only once. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be accessed on the County's website at www.co.clark.nv.us/clerk/forms.htm

	SECTION 1	
LOBBYIST NAME: _ Christop	her L. Kaempfer	
APPLICATION DATE:	COMMUNICAT	ION DATE:3/26/14
	MME Establishments/CWNevada, LLC	
COMMISSIONER(S) CONTACTE	ED: Commissioners Sisolak	
	SECTION 2	
PERMANENT ADDRESS:or		
BUSINESS NAME:		
BUSINESS ADDRESS:		
,	SECTION 3	
PROVIDE THE BUSINESS PERSON OR ENTITY BY BEHALF YOU ARE APPEARI	NAME, FULL NAME, AND COMPLE WHOM YOU ARE RETAINED, EMP NG TODAY:	TE ADDRESS OF EACH LOYED, OR ON WHOSE
NAME/BUSINESS NAME CWNevada, LLC	ADDRESS 611 South 6th Street, 2nd Floor Las Vegas, NV 89101	<u>PHONE</u> (702) 304-0123
Orbra		3/31/14
SIGNATURE OF LOBBYIST		DATE

^{*}An amendment to the registration must be filed with the County Clerk, Commission Division, if there is a substantial change or addition with respect to the information contained in the original registration statement,



[AMENDED]

———— NO. 8003——P.	1
Badge #Ann	nual
Return Date	
Renewal Date	
FILED	

This form should be completed for each communication with a member polither Board of County Commissioners and may be submitted to the front desk at the County Commissioner's Office or the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned. Lobbyists who are registered annually need to complete Section 2 only once. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be accessed on the County's website at www.co.clark.nv.us/clerk/forms.htm

SECTION 1	
LOBBYIST NAME: Christopher L. Kaempfer	3/4/117
APPLICATION DATE: COI	MMUNICATION DATE:
COMMUNICATION ITEMS:MME Establishments/CWNeva	da, LLC
COMMISSIONER(S) CONTACTED:Commissioners Sisolak	
SECTION 2	
PERMANENT ADDRESS: on file	
BUSINESS NAME:	
BUSINESS ADDRESS:	
SECTION 3	
PROVIDE THE BUSINESS NAME, FULL NAME, AND PERSON OR ENTITY BY WHOM YOU ARE RETAIN BEHALF YOU ARE APPEARING TODAY:	O COMPLETE ADDRESS OF EACH NED, EMPLOYED, OR ON WHOSE
NAME/BUSINESS NAME CWNevada, LLC ADDRESS 611 South 6th Street, 2nd Las Vegas, NV 89101	PHONE (702) 304-0123
Brown &	3/31/14
SIGNATURE OF LOBBYIST	DATE

^{*}An amendment to the registration must be filed with the County Clerk, Commission Division, if there is a substantial change or addition with respect to the information contained in the original registration statement.

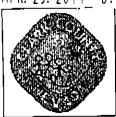


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Badge#	Annual
Return Date Renewal Date	
FIL	ED

This form should be completed for each communication with a member of the Ppap of County Commissioners and may be submitted to the front desk at the County Commissioner's Office of the Clerk's Office. Commission Division to obtain a "Lobbyist" badge that must be returned. <u>Lobbyists who are registered annually need to complete Section 2 only once</u>. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be seed on the County's website at www.co.clark.nv.us/clerk/forms.htm

	SECTION 1	
Cheistoph	er L. Kaempfer	
OBBYIST NAME:Christoph	O D. Peronipada	20601
APPLICATION DATE:	COMMUNICATION DATE	3/20/14
	D: Commissioners Sisolak	
	CTCOTTON 2	
PERMANENT ADDRESS: OF		
BUSINESS NAME:		
BUSINESS ADDRESS:		
PROVIDE THE BUSINESS PERSON OR ENTITY BY BEHALF YOU ARE APPEAR	NAME, FULL NAME, AND COMPLETE AS WHOM YOU ARE RETAINED, EMPLOYED ING TODAY:	ODRESS OF EACH O, OR ON WHOSE
	ABBOTCC	PHONE
Daine C Podgett	611 South 6" Street, 2" Floor	(702) 304-0123
	Las Vegas, NV 89101	
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Renewal Date	
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This form should be completed for each communication with a member **Min** phosph of County Commissioners and may be submitted to the front desk at the County Commissioner's Office of the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned. <u>Lobbyists who are registered annually need to complete Section 2 only once</u>. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This formed be excessed on the County's website at www.co.clark.nv.us/clerk/forms.htm
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	SECTION 1	
LOBBYIST NAME: Christopher L. Kae	empfer	
	COMMUNICATION DATE:	3/26/14
COMMUNICATION ITEMS: MME Esta	ablishments/CWNevada, LLC	
COMMISSIONER(S) CONTACTED: and	mmissioners Collins, Chris Giunchighani, We	
	SECTION 2	
PERMANENT ADDRESS: on file		
BUSINESS NAME:		
BUSINESS ADDRESS:		
	SECTION 3	
PROVIDE THE BUSINESS NAME, PERSON OR ENTITY BY WHOM BEHALF YOU ARE APPEARING TOD	FULL NAME, AND COMPLETE ADDRE YOU ARE RETAINED, EMPLOYED, OF PAY:	SS OF EACH ON WHOSE
NAME/BUSINESS NAME ADD CWNevada, LLC 611	ORESS South 6 th Street, 2 nd Floor Vegas, NV 89101	<u>PHONE</u> (702) 304-0123
Colorate)		3/31/14
SIGNATURE OF LOBBYIST	DATE	

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This form should be completed for each communication with a membell of County Commissioner's Office or the County Commissioner's Office or the Clerk's Office, Commission Division to obtain a "Lobbyist" badge that must be returned. Lobbyists who are registered annually need to complete Section 2 only once. Completed forms may also be submitted by fax to the County Clerk, Commission Division at 455-4626. This form can be accessed on the County's website at www.co.clark.nv.us/clerk/forms.htm

	SECTION 1	
Ol : hou	r L. Kaempfer	
OBBYIST NAME: Christopher		
PPLICATION DATE:	COMMUNICATION DATE:	3/26/14
COMMISSIONER(S) CONTACTED	o: Commissioners Sisolak	
		<u></u>
PERMANENT ADDRESS:on	file	
BUSINESS NAME:		
BUSINESS ADDRESS:		
	SECTION 3	
PROVIDE THE BUSINESS PERSON OR ENTITY BY BEHALF YOU ARE APPEARII	NAME, FULL NAME, AND COMPLETE ADD WHOM YOU ARE RETAINED, EMPLOYED,	RESS OF EACH OR ON WHOSE
NAME/BUSINESS NAME CWNevada, LLC	ADDRESS 611 South 6th Street, 2nd Floor Las Vegas, NV 89101	PHONE (702) 304-0123
Corona	6	3/31/14
SIGNATURE OF LOBBYIST	DATE	

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Badge # Return Date	Amnual
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	SECTION 1	
LOBBYIST NAME: Christopher L	. Kaempfer/Tabitha Fiddyment	
APPLICATION DATE:	COMMUNICATIO	ON DATE: 4/14/14
COMMUNICATION ITEMS: IP Par	tners, LLC - Kiosks - Las Vegas Blv	d/Tropicana
COMMISSIONER(S) CONTACTED:	Commissioners Scow, Chris G., Co	ollins and Brager
	SECTION 2	10 day
PERMANENT ADDRESS: on file		
BUSINESS NAME:		
•		
	SECTION 3	
PROVIDE THE BUSINESS NAM PERSON OR ENTITY BY WHO BEHALF YOU ARE APPEARING T	ME, FULL NAME, AND COMPLE DM YOU ARE RETAINED, EMPL ODAY:	TE ADDRESS OF EACH OYED, OR ON WHOSE
	<u>ADDRESS</u> 3761 S. Las Vegas Blvd.	PHONE
Barry Fieldman	Las Vegas, NV 89109	702.456.8744
OLD TO		
To the first own of	^	
SIGNATURE OF LOBBYIST		4/16/14 DATE

^{*}An amendment to the registration must be filed with the County Clerk, Commission Division, if there is a substantial change or addition with respect to the information contained in the original registration statement.



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SECTION 1	
LOBBYIST NAME: Christopher L. Kaempfer/Tabitha Fiddyme	ent
APPLICATION DATE: COMM	UNICATION DATE: 4/15/14
COMMUNICATION ITEMS: IP Partners, LLC - Kiosks - Las V	egas Blvd./Tropicana
COMMISSIONER(S) CONTACTED: Commissioner Brown	
SECTION 2	, ,
BERMANGAT ADDRESS AT £1.	
BUSINESS NAME:	
BUSINESS ADDRESS:	
SECTION 3	
PROVIDE THE BUSINESS NAME, FULL NAME, AND C PERSON OR ENTITY BY WHOM YOU ARE RETAINED BEHALF YOU ARE APPEARING TODAY:	OMPLETE ADDRESS OF EACH , EMPLOYED, OR ON WHOSE
NAME/BUSINESS NAME ADDRESS 3761 S. Las Vegas Blvd.	PHONE
Barry Fieldman Las Vegas, NV 89109	702.456.8744
0	
Service Services	
SIGNATULE Tieldsment	4/16/14 DATE
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KAEMPFER CROWELL



CLARK COUNTY LOBBYIST REGISTRATION STATEMENT

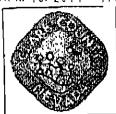
NO.	7985——P. 2—— —
Badge # Return Date	Annual
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	SECTION 1	
OBBYIST NAME: Christopher	L. Kaempfer/Tabitha Fiddyment	
	COMMUNICATION DAT	re: 4/15/14
COMMUNICATION ITEMS: Tix		
COMMISSIONER(S) CONTACTED:	Commissioner Brown	
	SECTION 2	
PERMANENT ADDRESS: on fi	ile	
BUSINESS NAME:		
BUSINESS ADDRESS:		
	SECTION 3	
PROVIDE THE BUSINESS N PERSON OR ENTITY BY V BEHALF YOU ARE APPEARIN	NAME, FULL NAME, AND COMPLETE A VHOM YOU ARE RETAINED, EMPLOYER G TODAY:	DDRESS OF EACH
NAME/BUSINESS NAME	ADDRESS	<u>PHQNE</u>
Mitch Francis	12711 Ventura Blvd. Studio City, CA 91604	818.761.1002
CHENT	5	
()ahrthiddyne	at	4/16/14
SIGNATURE OF LORBYIST	DATE	

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NO.	7985—	- P.	1-



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DATE: 4/14/14
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PHONE
818.761.1002
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4/16/14 DATE

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